AMERICANS FOR GROWTH, CEIVED OPPORTUNITY AND PROGRESS AM 10: 22

101 South 5th St, Suite 2500 MAIL CENTER Louisville, KY 40202

Federal Election Commission 999 E Street, N.W. Washington, D.C. 20463

Re: Form 1, Statement of Organization—Unlimited Contributions

To Whom It May Concern:

This committee intends to make independent expenditures, and consistent with the U.S. Court of Appeals for the District of Columbia Circuit decision in SpeechNow v. FEC, it therefore intends to raise funds in undimited amounts. This committee will not use those funds to make contributions, whether direct, in-kind, or via coordinated communications, to federal candidates or committees.

Respectfully submitted,

Michael D. adam

Michael G. Adams,

Treasurer

FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVED 7

2012 FEB 27 AM 10: 22

FORM 1		UKGAN	NIZATIO	PIN .	F	E Com Albori	CENTER
NAME OF COMMITTEE (in	n full)	(Check if nar is changed)		ple:If typing, type the lines.	12FE4M	on almostikusvijans 🕹	
AMERICA	NS FC	OR GROWT	H, OPP	ORTUNITY	AND F	ROGRE	SS
ADDRESS (number a	nd street)	101 SOUTH 5TH ST	STE 2500				
(Check if ac is changed)		LOUISVILLE			KY	40202	- <u> -</u>
			CITY		STATE	ZIP C	ODE
COMMITTEE'S E-MA (Check if is change	address	SS (Please provide only michael.adams@din		ress)			<u> </u>
COMMITTEE'S WEB	PAGE ADD	RESS (URL)					
(Check if is change					 		
2. DATE 02	w / 65 2 17	D / 3 Y H Y 5 Y 7 Y 2012					
3. FEC IDENTIFIC	CATION NU	4,	C	र पहुंचा प्रकार कारण कारण का स्थाप के प्रकार का स्थाप हैं हैं इसके प्रकार की का सकती बना के प्रकार की का स्थाप के प्रकार की		·	
4. IS THIS STATEM	MENT 🗶	NEW (N)	OR []	AMENDED (A)			
Type or Print Name of Signature of Treasure	of Treasurer	S Statement and to the MICHAEL G. ADAMS Weller Dus, or incomplete informany CHANGE IN INFO	S Mation may subject	down_	Date O	to the penalties of	2 U.S.C. §437g.
Office Use Only			F	or further information c ederal Election Commission oll Free 800-424-9530		FEC FC (Revised C	

5.

		COMMITTEE e Committae:
(a)		This committee is a principal campaign committee. (Complete the candidate information below.)
(b)	Charles	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)
Nam Cand	e of didate	
	didate Affiliat	Office State Senate President District
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.
Nam Cand	e of lidate	
Par	ty Cor	mmittee:
(d)		This committee is a (National, State or subordinate) committee of the Republican, etc.) Party.
Poli		Action Committee (PAC):
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a
		Corporation Corporation w/o Capital Stock Labor Organization
		Membership Organization Trade Association Cooperative
		In addition, this committee is a Lobbyist/Registrant PAC.
(f)	X	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)
		In addition, this committee is a Lebbyist/Registrant PAC.
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)
Join	t Fund	draising Representative:
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.
	Com	nmittees Participating in Joint Fundraiser
	1.	FEC ID number
	2.	FEC ID number
	3.	FEC ID number C
	4.	

Write or Type Committee Name AMERICANS F	OR GROWTH, OPPORTUNITY AND PROGRESS
· · · · · · · · · · · · · · · · · · ·	rganization; Affiliated Committee, Joint Fundraising Representative; or Leadership PAC Sponsor
NONE	
Mailing Address	
	CITY STATE ZIP CODE
(27%);	Harring parting.
Relationship:	Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor
Custodian of Records: Iden books and records.	tify by name, address (phone number optional) and position of the person in possession of committee
MICHAEL Full Name	G. ADAMS
Mailing Address	801 PENNSYLVANIA AVE NW STE 610
	[
	WASHINGTON DC 20004
Title or Position	CITY STATE ZIP CODE
TREASURER	Telephone number 202 372 9115
B. Treasurer: List the name and any designated agent (e.g., a	address (phone number optional) of the treasurer of the committee; and the name and address of ssistant treasurer).
Full Name MICHAEL 0	G. ADAMS
Mailing Address	801 PENNSYLVANIA AVE NW STE 610
	WASHINGTON DC 20004 -
Title or Position TREASURER	CITY STATE ZIP CODE Telephone number 202 - 372 - 9115

rec ron	n 1 (Revised	02/2009)	Page 4
Full Name of			
Designated Agent			
Mailing Address			
		CITY STATE .	ZIP CODE
Title or Position			
		Telephone number	
safety deposit b	oxes or mainta		holds accounts, rents
safety deposit b Name of B ank,	oxes or maint Depository, et	tains funds.	holds accounts, rents
safety deposit b Name of B ank,	oxes or maint Depository, et	tains funds. tc. BRIDGE BANK	holds accounts, rents
safety deposit b Name of B ank,	oxes or maint Depository, et	tains funds. tc. BRIDGE BANK 1445-A LAUGHLIN AVE	holds accounts, rents
safety deposit b Name of B ank,	oxes or maint Depository, et	tains funds. tc. BRIDGE BANK 1445-A LAUGHLIN AVE MCLEAN VA 1 122	
safety deposit b Name of B ank, Mailing Address	oxes or maint Depository, et	tains funds. tc. BRIDGE BANK 1445-A LAUGHLIN AVE MCLEAN CITY STATE	101
safety deposit b Name of B ank, Mailing Address	oxes or maint Depository, et	tains funds. tc. BRIDGE BANK 1445-A LAUGHLIN AVE MCLEAN CITY STATE	101
safety deposit b Name of Bank, Mailing Address Name of Bank,	oxes or maint Depository, et	tains funds. tc. BRIDGE BANK 1445-A LAUGHLIN AVE MCLEAN CITY STATE	
safety deposit b Name of Bank, Mailing Address Name of Bank,	oxes or maint Depository, et	tains funds. tc. BRIDGE BANK 1445-A LAUGHLIN AVE MCLEAN CITY STATE	
safety deposit b Name of Bank, Mailing Address Name of Bank,	oxes or maint Depository, et	tains funds. tc. BRIDGE BANK 1445-A LAUGHLIN AVE MCLEAN CITY STATE	101
Banks or Other safety deposit by Name of Bank, Mailing Address Name of Bank, Mailing Address	oxes or maint Depository, et	tains funds. tc. BRIDGE BANK 1445-A LAUGHLIN AVE MCLEAN CITY STATE	101

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received. **Date of Receipt Hand Delivered Postmarked USPS First Class Mail** Postmarked (R/C) **USPS** Registered/Certified **Postmarked USPS Priority Mail** Delivery Confirmation™ or Signature Confirmation™ Label **Postmarked USPS Express Mail** Postmark Illegible No Postmark Shipping Date Overnight Delivery Service (Specify): For Exp 2/24/12 Next Business Day Delivery **Date of Receipt** Received from House Records & Registration Office **Date of Receipt** Received from Senate Public Records Office **Date of Receipt** Received from Electronic Filing Office Date of Receipt or Postmarked Other (Specify):